

STATE OF IOWA DEPARTMENT OF NATURAL RESOURCES

FORESTRY BUREAU 502 EAST 9TH STREET WALLACE STATE OFFICE BUILDING DES MOINES, IOWA 50319-0034

Bond No.

CORPORATE SURETY BOND COVERING THE PURCHASE OF TIMBER FROM TIMBER GROWERS BY A TIMBER BUYER OR BUYER'S AGENT

KNOW ALL PERSONS BY THESE PRESENTS, that we	we,	
of the City of		
County of State of	as Principal, and as Surety	
are held and firmly bound unto the Department of Natural Res	sources in the sum of dollars	
	and surety bind themselves, their heirs, executors, administrators, e fore the use or benefit of any timber grower from whom the principal by the principal therefore.	
WHEREAS, THE PROVISIONS OF THIS OBLIGATION	ON ARE SUCH that the principal herein shall:	
 a timber grower. (d) honestly account to the timber grower or the department (e) refrain from committing any fraudulent act in connection (f) transport timber only with written proof of ownership or 	te bond or other information required to be given to the department or for timber purchased or cut if the buyer is under a duty to do so. I with the purchase or cutting of timber.	
	ng sixty (60) days prior written notice to the State of Iowa, Department terminate the surety's future liability only commencing sixty (60) days e, this obligation shall remain in full force and effect.	
X	X	
Surety	X Principal	
ACKNOWLEDGEMENT	ACKNOWLEDGEMENT	
Before me, the undersigned authority, this day personally	Before me, the undersigned authority, this day personally	
appeared,	appeared,	
who acknowledged executing the foregoing bond for the uses and purposes therein set forth.	who acknowledged executing the foregoing bond for the uses and purposes therein set forth.	
Subscribed and sworn to before me this day of, 20	Subscribed and sworn to before me this day of, 20	
Notary	Notary	
Notary Public for County, State of Iowa.	Notary Public for County, State of Iowa.	
My Commission expires:	My Commission expires:	

ACKNOWLEDGEMENT BY ATTORNEY IN FACT

STATE OF IOWA }	
COUNTY OF}	SS
On this day of	, 20, before me, the undersigned, a Notary Public in and for
said county and state, personally appeared	, (Attorney In
of	(Principal) to me personally known to be
the identical person(s) named in and who executed the executed the same as a voluntary act and deed.	he within and foregoing instrument, and acknowledge that
SEAL	Notary Public
	In and For Said State
	My Commission Expires: